Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS			(Column 1)		(COIL	(Column 2)		TYPE [OR 7			
ļ			1.					RATE	FEE	-	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			3Ψ minus 20=		* [4			X\$ 9=		OR	X\$18=	252	
INDEPENDENT CLAIMS			L	inus 3 =	2	<i>,</i>		X43=		OR	X86=	172	
MU	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	.+290=		
* If the difference in column 1 is less than zero,					"0" in c	olumn 2	,	TOTAL		OR	TOTAL	Tlar	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
			(Colum		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	** .		<u>.=</u>		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
(19, 28/20/32								+145= TOTAL		<u>ተ</u> " '	TOTAL		
(Column 1) (Column 2) (Column 3)											ADDIT. FEE		
8		CLAIMS		HIGHE	ST		ı		ADDI-	1 1	. 1	ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL	
	Total	*	Minus	**	•	=		X\$ 9=		OR	X\$18=		
4ME	Independent	*	Minus	***		= .		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		1 1			
٠,										OR	+290= TOTAL		
										OR A	DDIT. FEE		
	`	(Column 1)		(Colum		(Column 3)	_			_			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBI PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent		Minus	***		=	r	X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1	OR	7.552		
* 14	the entry in colum	+145=		OR	+290=								
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								·	OR A	TOTAL DDIT. FEE		
7	he "Highest Num	ber Previously Paid	iu ror in THIS For" (Total or I	o SPACE is i Independen	ess than t) is the f	3, enter "3." highest number		DIT. FEE L	opriate box				